Case 21-01750-dd Doc 1 Filed 07/01/21 Entered 07/01/21 13:12:53 Desc Main Document Page 1 of 59

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF SOUTH CAROLINA	-	
Case number (if known)	_ Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

04/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):	
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Celeste First name Danielle Middle name Yelvington Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)	
2.	All other names you have used in the last 8 years Include your married or maiden names.	Celeste D Yelvington		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-2102		

Case 21-01750-dd Doc 1 Filed 07/01/21 Entered 07/01/21 13:12:53 Desc Main Document Page 2 of 59

Debtor 1 Celeste Danielle Yelvington

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EIN	☐ I have not used any business name or EINs. Business name(s) EIN
5.	Where you live	1013 W Richardson Avenue Summerville, SC 29483-3735	If Debtor 2 lives at a different address:
		Number, Street, City, State & ZIP Code Dorchester County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number, P.O. Box, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)

Case 21-01750-dd Doc 1 Filed 07/01/21 Entered 07/01/21 13:12:53 Desc Main

		Document	Page 3 of 59	
Debtor 1	Celeste Danielle Yelvington		_	Case number (if known)

7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
	choosing to file under	■ Chapter 7						
		□ с	hapter 11					
		□ с	hapter 12					
		□ C	hapter 13					
8.	How you will pay the fee	•	about how yo	u may pay. Ty _l attorney is sub	pically, if you are paying the fee yo	with the clerk's office in your local court for more ourself, you may pay with cash, cashier's check, or ralf, your attorney may pay with a credit card or check	money	
					stallments. If you choose this option to (Official Form 103A).	n, sign and attach the Application for Individuals to	Pay	
			I request that but is not req applies to you	t my fee be wa uired to, waive ur family size a	aived (You may request this option your fee, and may do so only if yond you are unable to pay the fee in	only if you are filing for Chapter 7. By law, a judge ur income is less than 150% of the official poverty li installments). If you choose this option, you must f ial Form 103B) and file it with your petition.	ine that	
			ше Аррісанс	iii to nave tile	Chapter 7 Filling Fee Walved (Child	iai Form 1036) and me it with your petition.		
9.	Have you filed for bankruptcy within the last 8 years?	■ No						
	last o years:	□ 16	District		When	Case number		
			District		When	Case number		
			District		When	Case number		
10.	Are any bankruptcy	■ No)					
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner.	☐ Ye	es.					
	affiliate?		Debtor			Relationship to you		
			District		When	Case number, if known		
			Debtor			Relationship to you		
			District		When	Case number, if known		
11.	Do you rent your residence?	■ No	Go to I	ne 12.				
	residence:	□Ye	es. Has yo	ur landlord obt	ained an eviction judgment agains	you?		
				No. Go to line	12.			
						ludgment Against You (Form 101A) and file it as pa		

Deb	Case 21-01		Doc 1	Filed 07/01/21 Entered 07/01/21 13:12:53 Desc Main Document Page 4 of 59 Case number (if known)
Part	t3: Report About Any Bu	ısinesses Yo	ou Own as	a Sole Proprietor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Par	t 4.
		☐ Yes.	Name and	d location of business
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of I	business, if any
	If you have more than one sole proprietorship, use a separate sheet and attach		Number,	Street, City, State & ZIP Code
	it to this petition.		Check the	e appropriate box to describe your business:
			□ H	ealth Care Business (as defined in 11 U.S.C. § 101(27A))
			☐ Si	ngle Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
			☐ St	tockbroker (as defined in 11 U.S.C. § 101(53A))
			□ C	ommodity Broker (as defined in 11 U.S.C. § 101(6))
			□ No	one of the above
13.	Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor or a debtor as defined by 11 U.S.C. § 1182(1)?	proceed un	nder Subcha cosing to pr tatement, a	Chapter 11, the court must know whether you are a small business debtor or a debtor choosing to apter V so that it can set appropriate deadlines. If you indicate that you are a small business debtor or occeed under Subchapter V, you must attach your most recent balance sheet, statement of operations, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C.
	For a definition of small	■ No.	I am not f	iling under Chapter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing Code.	under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.		under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and hoose to proceed under Subchapter V of Chapter 11.
		☐ Yes.		under Chapter 11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I proceed under Subchapter V of Chapter 11.

Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? ■ No.

☐ Yes.

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

Debtor 1 Celeste Danielle Yelvington

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 21-01750-dd Doc 1 Filed 07/01/21 Entered 07/01/21 13:12:53 Desc Main Document Page 6 of 59

Deb	otor 1 Celeste Danielle Y	'elvingto	n	Case nun	nber (if known)		
Par	t 6: Answer These Quest	ions for R	eporting Purposes				
16.	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."				
			☐ No. Go to line 16b.				
			Yes. Go to line 17.				
		16b.		usiness debts? Business debts are debestment or through the operation of the b			
			☐ No. Go to line 16c.	ů .			
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you o	we that are not consumer debts or busing	ness debts		
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter	7. Go to line 18.			
	Do you estimate that after any exempt property is excluded and	■ Yes.		Do you estimate that after any exempt p ailable to distribute to unsecured credito	roperty is excluded and administrative expenses ors?		
	administrative expenses		■ No				
	are paid that funds will be available for distribution to unsecured creditors?		Yes				
18.	How many Creditors do	1 -49		1 ,000-5,000	☐ 25,001-50,000		
	you estimate that you owe?	☐ 50-99)	5001-10,000	□ 50,001-100,000		
	one.	☐ 100-1 ☐ 200-9		□ 10,001-25,000	☐ More than100,000		
19.	How much do you	□ \$0 - \$	550,000	□ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion		
	estimate your assets to be worth?	_	01 - \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion		
			001 - \$500,000 001 - \$1 million	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
20.	How much do you estimate your liabilities	□ \$0 - \$		□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion		
	to be?		001 - \$100,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million	□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion		
			,001 - \$500,000 ,001 - \$1 million	□ \$100,000,001 - \$100 million	☐ More than \$50 billion		
Par	t7: Sign Below						
For	you	I have ex	camined this petition, and I dec	clare under penalty of perjury that the inf	formation provided is true and correct.		
				, I am aware that I may proceed, if eligit elief available under each chapter, and	ole, under Chapter 7, 11,12, or 13 of title 11, I choose to proceed under Chapter 7.		
				not pay or agree to pay someone who is e notice required by 11 U.S.C. § 342(b).			
		I request	relief in accordance with the o	chapter of title 11, United States Code, s	specified in this petition.		
			tcy case can result in fines up		ey or property by fraud in connection with a 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519,		
		Celeste	este Danielle Yelvington Danielle Yelvington e of Debtor 1	Signature of De	btor 2		
		Executed	d on July 1, 2021 MM / DD / YYYY	Executed on	MM / DD / YYYY		

Case 21-01750-dd Doc 1 Filed 07/01/21 Entered 07/01/21 13:12:53 Desc Main Document Page 7 of 59

Debtor 1 Celeste Danielle Yelvington Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Richard	d A Steadman, Jr.	Date	July 1, 2021
Signature of	Attorney for Debtor		MM / DD / YYYY
	Steadman, Jr. 4284		
Printed name	Laurence D.A		
Steadman Firm name	Law Firm, P.A.		
	rs Avenue		
Suite 102	3 Avenue		
	n, SC 29406		
	City, State & ZIP Code		
Contact phone	843-529-1100	Email address	rsteadman@steadmanlawfirm.com
4284 SC			
Bar number & S	tato		

Case 21-01750-dd Doc 1 Filed 07/01/21 Entered 07/01/21 13:12:53 Desc Main Document Page 8 of 59

Fill in this infor					
Debtor 1	Celeste Danielle \	relvington			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	DISTRICT OF SOUTH	CAROLINA		
Case number _					☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

you	original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		•
Par	11: Summarize Your Assets		
			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	145,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	8,541.39
	1c. Copy line 63, Total of all property on Schedule A/B	\$	153,541.39
Par	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	157,209.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	45,828.00
	Your total liabilities	\$	203,037.00
Par	t3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,496.76
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,492.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sc	:hedules.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a	a personal	l, family, or

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

page 1 of 2

the court with your other schedules.

Case 21-01750-dd Doc 1 Filed 07/01/21 Entered 07/01/21 13:12:53 Desc Main Document Page 9 of 59

Debtor 1 Celeste Danielle Yelvington

Case number (if known)

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$_____1,184.48

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total c	laim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Case 21-01750-dd Doc 1 Filed 07/01/21 Entered 07/01/21 13:12:53 Desc Main Document Page 10 of 59

Single-family home	Do not deduct secured claims or exemptions. Put the amount of any secured claims or Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? \$145,000.00 Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known. Fee simple Check if this is community property (see instructions)
Poebtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: DISTRICT OF SOUTH CAROLINA Case number Official Form 106A/B Schedule A/B: Property neach category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the a hink it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible normation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name an answer every question. Port 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest in Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. Yes. Where is the property? 1.1 Street address, if available, or other description What is the property? Check all that apply Do not deduct sect the amount of any Creditors Who Hat Charleston City State ZIP Code Manufactured or mobile home Debtor 1 only Charleston County Charleston Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Check if this	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? \$145,000.00 Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known. Fee simple Check if this is community property (see instructions)
Debtor 2 (Spouse, if filling) First Name Middle Name Last Name United States Bankruptcy Court for the: DISTRICT OF SOUTH CAROLINA Case number Difficial Form 106A/B Schedule A/B: Property neach category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the a high into the category separately list and describe items. List an asset only once. If an asset fits in more than one category, list the a high into the category separately list and describe items. List an asset only once. If an asset fits in more than one category, list the a separate sheet to this form. On the top of any additional pages, write your name and shower every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. Yes. Where is the property? What is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Describe the natus of tentire property? Charleston Sc 29412-0000 City State ZIP Code Manufactured or mobile home Land Describe the natus (such as fee sling a life estate), if kr Fee simple Charleston Debtor 1 only Debtor 2 only Debtor 2 only Check if this	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? \$145,000.00 Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known. Fee simple Check if this is community property (see instructions)
United States Bankruptcy Court for the: DISTRICT OF SOUTH CAROLINA Case number Difficial Form 106A/B Schedule A/B: Property neach category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the a nink if it its best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name an unswer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest in Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. Yes. Where is the property? 1.1 1530 Fort Johnson Road, Unit 2L Street address, if available, or other description What is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Describe the national side of the control of the centre property? Sitest and research in the property? Check one Timeshare Other Who has an interest in the property? Check one Describe the national a life estate), if kere simple Charleston County Charleston County Check if this	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? \$145,000.00 Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known. Fee simple Check if this is community property (see instructions)
Case number Official Form 106A/B Schedule A/B: Property In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the a chink it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name at inswer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In Do you own or have any legal or equitable Interest in any residence, building, land, or similar property? No. Go to Part 2. Yes. Where is the property? What is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property State Vine Part 2. Charleston City State Describe the nate (such as easing a life estate), if it will be property? Check one Tother (such as easing a life estate), if it is ea	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? \$145,000.00 Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known. Fee simple Check if this is community property (see instructions)
Difficial Form 106A/B Schedule A/B: Property In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the a hink it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name at masser every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. Yes. Where is the property? What is the property? Check all that apply Single-family home Do not deduct see the amount of any Creditors Who Hair Condominium or cooperative Manufactured or mobile home Land Charleston City State ZiP Code Manufactured or mobile home Land Investment property? \$145,000 Describe the natic (such as fee simple Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 2 only Check if this	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? \$145,000.00 Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known. Fee simple Check if this is community property (see instructions)
Difficial Form 106A/B Schedule A/B: Property In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the a hink it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name at masser every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. Yes. Where is the property? What is the property? Check all that apply Single-family home Do not deduct see the amount of any Creditors Who Hair Condominium or cooperative Manufactured or mobile home Land Charleston City State ZiP Code Manufactured or mobile home Land Investment property? \$145,000 Describe the natic (such as fee simple Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 2 only Check if this	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? \$145,000.00 Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known. Fee simple Check if this is community property (see instructions)
neach category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the a hink it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name an unswer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. Yes. Where is the property? 1.1 1530 Fort Johnson Road, Unit 2L. Street address, if available, or other description What is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Manufactured or mobile home Land Manufactured or mobile home Land Describe the natu (such as fee simple Debtor 1 only Debtor 1 only Debtor 2 only Check if this	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? \$145,000.00 Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known. Fee Simple Check if this is community property (see instructions)
n each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the a hink it fits best. Be as complete and accurate as possible. If two married people are filling together, both are equally responsible name of the more question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name an answer every question. Part 12 Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. Yes. Where is the property? 1.1 Street address, if available, or other description What is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Manufactured or mobile home Land Manufactured or mobile home Land Describe the natu (such as fee simple of the manual of the property? Check one Debtor 1 only Describe the natu (such as fee simple all fee seatele), if kr Fee simple Charleston County Check if this	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? \$145,000.00 Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known. Fee simple Check if this is community property (see instructions)
neach category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the arbitish it fits best. Be as complete and accurate as possible. If two married people are filling together, both are equally responsible information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and answer every question. Part 11 Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. Yes. Where is the property? 1.1 1530 Fort Johnson Road, Unit 2L Street address, if available, or other description What is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Describe the natic such as fee simple a life estate), if kree simple Charleston Charleston Charleston County Debtor 1 only Debtor 2 only Check if this	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? \$145,000.00 Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known. Fee simple Check if this is community property (see instructions)
meach category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the arbitish it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and the surface of the content o	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? \$145,000.00 Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known. Fee Simple Check if this is community property (see instructions)
hink it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible normation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. Yes. Where is the property? What is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Charleston City State ZIP Code Manufactured or mobile home Land Describe the natic such as fee simple Charleston Debtor 1 only Debtor 2 only Check iff this Check iff this	h are equally responsible for supplying correct pages, write your name and case number (if known). Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? \$145,000.00 Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known. Fee simple Check if this is community property (see instructions)
No. Go to Part 2.	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? \$145,000.00 Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known. Fee Simple Check if this is community property (see instructions)
No. Go to Part 2.	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? \$145,000.00 Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known. Fee Simple Check if this is community property (see instructions)
1.1 1530 Fort Johnson Road, Unit 2L Street address, if available, or other description Charleston City State ZIP Code Charleston County What is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Other Who has an interest in the property? Check one Debtor 1 only Check if this	the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? \$145,000.00 Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known. Fee simple Check if this is community property (see instructions)
## What is the property? Check all that apply 1530 Fort Johnson Road, Unit 2L Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Current value of the amount of any Creditors Who Hat Creditors Who Hat	the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? \$145,000.00 Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known. Fee simple Check if this is community property (see instructions)
Single-family home	the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? \$145,000.00 Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known. Fee simple Check if this is community property (see instructions)
Single-family home	the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? \$145,000.00 Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known. Fee simple Check if this is community property (see instructions)
Single-family home	the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? \$145,000.00 Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known. Fee Simple Check if this is community property (see instructions)
Street address, if available, or other description Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Land Investment property Inmeshare Other Who has an interest in the property? Check one Debtor 1 only County Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Univestment property S145,000 Describe the natu (such as fee simple a life estate), if km Fee simple Charleston County Debtor 2 only Check if this	the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? \$145,000.00 Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known. Fee simple Check if this is community property (see instructions)
Charleston SC 29412-0000 City State ZIP Code Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Charleston County Check if this	Current value of the entire property? portion you own? \$145,000.00 \$145,000.00 Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known. Fee simple Check if this is community property (see instructions)
Charleston SC 29412-0000 City State ZIP Code Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only County Check if this	entire property? portion you own? \$145,000.00 \$145,000.00 Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known. Fee simple Check if this is community property (see instructions)
Charleston City State ZIP Code Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only County Land entire property? \$145,000 \$145,000 Describe the natu (such as fee simple a life estate), if kir Fee simple	entire property? portion you own? \$145,000.00 \$145,000.00 Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known. Fee simple Check if this is community property (see instructions)
☐ Timeshare ☐ Other ☐ Other Who has an interest in the property? Check one ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ County ☐ Debtor 1 and Debtor 2 only ☐ Check if this	Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known. Fee simple Check if this is community property (see instructions)
Other	(such as fee simple, tenancy by the entireties, or a life estate), if known. Fee simple Check if this is community property (see instructions)
Who has an interest in the property? Check one □ Debtor 1 only Charleston □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only	a life estate), if known. Fee simple Check if this is community property (see instructions)
Charleston County Debtor 2 only Debtor 2 only Check if this	☐ Check if this is community property (see instructions)
County Debtor 1 and Debtor 2 only Check if this	(see instructions)
Check if this	(see instructions)
☐ At least one of the debtors and another ☐ (see instructions	(
Other information you wish to add about this item, such as local	
property identification number:	
TMS: 425-14-00-181	

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Page 11 of 59 Document Case number (if known) Debtor 1 **Celeste Danielle Yelvington** 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Mercedes-Benz Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: S320 Creditors Who Have Claims Secured by Property. Model: Debtor 1 only 1997 Year: Debtor 2 only Current value of the Current value of the 250000 Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another VIN: WDBGA33G7VA348383 \$4,500.00 \$4,500.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$4,500.00 .pages you have attached for Part 2. Write that number here......>> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... Miscellaneous household goods and furnishings \$2,500.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... Cell phone, 3 TVs, desktop computer, printer \$300.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... Examples: Pistols, rifles, shotguns, ammunition, and related equipment Nο

Case 21-01750-dd

Doc 1

Filed 07/01/21

Entered 07/01/21 13:12:53

Case 2	1-01750-dd Doc 1		Entered 07/01/ Page 12 of 59	21 13:12:53	Desc Main
Debtor 1 Celeste	Danielle Yelvington		Case	number (if known)	
☐ Yes. Describe					
□ No	day clothes, furs, leather coats	, designer wear, shoes, a	ccessories		
Yes. Describe					
	Miscellaneous wor	nen's clothing			\$50.00
12. Jewelry Examples: Every No Yes. Describe	day jewelry, costume jewelry, e	engagement rings, weddir	ng rings, heirloom jewelry,	watches, gems, gol	d, silver
	Miscellaneous jew	elry			\$50.00
		-			
13. Non-farm animal					
■ No	cats, birds, horses				
☐ Yes. Describe					
14. Any other person	nal and household items you	ı did not already list, inc	luding any health aids y	ou did not list	
■ No					
☐ Yes. Give spec	cific information				
	value of all of your entries from			ave attached	\$2,900.00
- " "					
Part 4: Describe Your Do you own or have	r Financial Assets any legal or equitable intere	est in any of the followin	g?		Current value of the portion you own? Do not deduct secured claims or exemptions.
40. 0 1					ciains of exemptions.
`	y you have in your wallet, in yo	ur home, in a safe depos	t box, and on hand when	you file your petition	
■ No □ Yes					
	ey king, savings, or other financial utions. If you have multiple acco			nions, brokerage ho	uses, and other similar
Yes		Institution na	ne:		
		Chime			
	17.1. Checking	Acct ending	g in 1568		\$958.06
	17.2. Savings	Chime			\$183.33
	unds, or publicly traded stoc funds, investment accounts wi		y market accounts		
☐ Yes	Institution or is	suer name:			
joint venture	ded stock and interests in inc	corporated and unincor	porated businesses, incl	uding an interest i	n an LLC, partnership, and
■ No □ Yes. Give spec	sific information about them				
Official Form 106A/B		Schedule A/B: Pro	perty		page 3

Case 21-01750-dd Doc 1 Filed 07/01/21 Entered 07/01/21 13:12:53 Desc Main Document Page 13 of 59

Celeste Danielle Yelvington Case number (if known)

	Name of entity:	9	6 of ownership:	
	Government and corporate bonds and other negotiabl Negotiable instruments include personal checks, cashiers Non-negotiable instruments are those you cannot transfer No ✓ Yes. Give specific information about them Issuer name:	checks, promissory notes, and mone		
	Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b) ■ No	, thrift savings accounts, or other pen	sion or profit-sharing plans	S
	☐ Yes. List each account separately. Type of account:	Institution name:		
22.	Security deposits and prepayments Your share of all unused deposits you have made so that Examples: Agreements with landlords, prepaid rent, public No			or others
	□ Yes	Institution name or individual:		
23.	Annuities (A contract for a periodic payment of money to	ou, either for life or for a number of y	ears)	
	■ No □ Yes Issuer name and description.			
24.	Interests in an education IRA, in an account in a qualifite 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No	ed ABLE program, or under a quali	fied state tuition progran	n.
		parately file the records of any interes	ts.11 U.S.C. § 521(c):	
	Trusts, equitable or future interests in property (other ■ No □ Yes. Give specific information about them	than anything listed in line 1), and i	rights or powers exercis	able for your benefit
	Patents, copyrights, trademarks, trade secrets, and othe Examples: Internet domain names, websites, proceeds from No □ Yes. Give specific information about them		3	
27.	Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperation No □ Yes. Give specific information about them	ve association holdings, liquor license	es, professional licenses	
M	oney or property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
	Tax refunds owed to you ■ No □ Yes. Give specific information about them, including when	ther you already filed the returns and	the tax years	
	Family support Examples: Past due or lump sum alimony, spousal suppo No ☐ Yes. Give specific information	rt, child support, maintenance, divorce	e settlement, property settl	lement
	Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, benefits; unpaid loans you made to someone of the No ■ No Yes. Give specific information		pay, workers' compensati	on, Social Security

Case 21-01750-dd Doc 1 Filed 07/01/21 Entered 07/01/21 13:12:53 Desc Main Document Page 14 of 59

Debic	Celeste Danielle Yelvington	Case number (if known)	
	terests in insurance policies	0.4.)	
	xamples: Health, disability, or life insurance; health savings account (H	SA); credit, nomeowner's, or renter's insural	nce
	Yes. Name the insurance company of each policy and list its value.		
	Company name:	Beneficiary:	Surrender or refund
	, ,	•	value:
lf s∈	• • •		eive property because
Ц	Yes. Give specific information		
E	aims against third parties, whether or not you have filed a lawsuit ixamples: Accidents, employment disputes, insurance claims, or rights to No Yes. Describe each claim		
34. O 1	ther contingent and unliquidated claims of every nature, including	counterclaims of the debtor and rights to	set off claims
	No	•	
	Yes. Describe each claim		
35 Δ ι	ny financial assets you did not already list		
00. A.			
	Yes. Give specific information		
	Add the dollar value of all of your entries from Part 4, including any or Part 4. Write that number here		\$1,141.39
Part 5	Describe Any Business-Related Property You Own or Have an Interest In	. List any real estate in Part 1.	
37. Do	you own or have any legal or equitable interest in any business-related pro	operty?	
	lo. Go to Part 6.		
ΠY	es. Go to line 38.		
Part 6	Describe Any Farm- and Commercial Fishing-Related Property You Own If you own or have an interest in farmland, list it in Part 1.	or Have an Interest In.	
46. D o	you own or have any legal or equitable interest in any farm- or co	ommercial fishing-related property?	
	No. Go to Part 7.		
	Yes. Go to line 47.		
Part 7	Describe All Property You Own or Have an Interest in That You Did	Not List Above	
	o you have other property of any kind you did not already list?		
	Yes. Give specific information		
54.	Add the dollar value of all of your entries from Part 7. Write that nu	mber here	\$0.00

Official Form 106A/B Schedule A/B: Property page 5 Case 21-01750-dd Doc 1 Filed 07/01/21 Entered 07/01/21 13:12:53 Desc Mail Document Page 15 of 59

Debtor 1 Case number (if known) **Celeste Danielle Yelvington** List the Totals of Each Part of this Form Part 8: Part 1: Total real estate, line 2 55. \$145,000.00 Part 2: Total vehicles, line 5 56. \$4,500.00 Part 3: Total personal and household items, line 15 57. \$2,900.00 58. Part 4: Total financial assets, line 36 \$1,141.39 Part 5: Total business-related property, line 45 59. \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... Copy personal property total 62. \$8,541.39 \$8,541.39 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$153,541.39

Official Form 106A/B Schedule A/B: Property page 6

Case 21-01750-dd Doc 1 Filed 07/01/21 Entered 07/01/21 13:12:53 Desc Main Document Page 16 of 59

Fill in this information to identify your case:							
Debtor 1							
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the:		DISTRICT OF SOUTH (CAROLINA				
Case number (if known)					☐ Check if this is an		
					amended filing		

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption	
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
1530 Fort Johnson Road, Unit 2L Charleston, SC 29412 Charleston	√ 3143.000.00 ■ 300.000.00		S.C. Code Ann. § 15-41-30(A)(1)(a)		
County TMS: 425-14-00-181 Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	10 41 00(1)(1)(4)	
1997 Mercedes-Benz S320 250000 miles	\$4,500.00		\$4,500.00	S.C. Code Ann. § 15-41-30(A)(2)	
VIN: WDBGA33G7VA348383 Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	10 41 00(A)(2)	
Miscellaneous household goods and furnishings	\$2,500.00	•	\$2,500.00	S.C. Code Ann. § 15-41-30(A)(3)	
Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	. , ,	
Cell phone, 3 TVs, desktop computer printer	\$300.00		\$300.00	S.C. Code Ann. § 15-41-30(A)(3)	
Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	, , , , , , , , , , , , , , , , , , ,	
Miscellaneous women's clothing Line from Schedule A/B: 11.1	\$50.00		\$50.00	S.C. Code Ann. § 15-41-30(A)(3)	
			100% of fair market value, up to any applicable statutory limit		

Case 21-01750-dd Doc 1 Filed 07/01/21 Entered 07/01/21 13:12:53 Desc Main Document Page 17 of 59

De	or 1 Celeste Danielle Yelvington			Case number (if known)			
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the Amount of the exemption you claim portion you own		Specific laws that allow exemption			
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.			
	Miscellaneous jewelry Line from Schedule A/B: 12.1	\$50.00	\$50.00		S.C. Code Ann. § 15-41-30(A)(4)		
	Ellio IIolii odiloddio 772. TETT			100% of fair market value, up to any applicable statutory limit			
	Checking: Chime Acct ending in 1568	\$958.06		\$958.06	S.C. Code Ann. § 15-41-30(A)(7) Unused		
	Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	Homestead		
	Savings: Chime Line from Schedule A/B: 17.2	\$183.33		\$183.33	S.C. Code Ann. § 15-41-30(A)(5)		
	Line Holli Golleddie PAB. 11.2			100% of fair market value, up to any applicable statutory limit	13 41 33(A)(3)		
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/22 and every	led on or after the date of adjustmen	nt.)				
■ No							
	☐ Yes. Did you acquire the property cover	red by the exemption wi	ithin 1	,215 days before you filed this case	?		
	□ No						
	Π Yes						

Case 21-01750-dd Doc 1 Filed 07/01/21 Entered 07/01/21 13:12:53 Desc Main Document Page 18 of 59

Debtor 1 Celeste Danielle Yelvington Pirst Name			Document Pa	ge 18 c	of 59		
Debtor 2 (Spouse it, filing) First Name Middle Name Last Name Middle Name Last Name United States Bankruptcy Court for the: DISTRICT OF SOUTH CAROLINA Case number (It known) Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case unumber (if known). Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Parti: List All Secured Claims To reach claim. If more than one creditor has more than one secured claim, list the creditor's name in sphabeteal order according to the receitor's name. Describe the property that secures the claim: Cireditor's Name Describe the property that secures the claim: 1530 Fort Johnson Road, Unit 2L Charleston, SC 29406 Number, Street, City, State & Zp Code Who owes the debt? Check one. Brigadier Condominiums 4295 Lacross Rd Init 112 Charleston, SC 29406 Number, Street, City, State & Zp Code Who owes the debt? Check one. Saturo of lies, Check all that apply. An agreement you made (such as mortgage or secured care loan) Statutory lies (such as tax lien, mechanic's lien) At least one of the debtors and another Check it this claim rates to a south to other calcider to constitution of the colors and another Check it this claim rates to a south to other calcider to check it this claim rates to a south to constitute the colors and another Check it this claim rates to a south to color the colors and another Check it this claim rates to a south to color the colors and another Check it this claim rates to a south to color the colors and another Check it this claim rates to a south the color is colored	Fill in this information	n to identify you	r case:				
Debtor 2 Spouse if, fillings First Name Middle Name Last Name Last Name	Debtor 1 Co	eleste Danielle	Yelvington				
United States Bankruptcy Court for the: DISTRICT OF SOUTH CAROLINA Case number ((Novam)) Check if this is an amended filing Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case unumber (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Part 1: List All Secured Claims. 2. List all secured claims. If a creditor has more than one secured daim, list the other creditors in Part 2. As a mount of claim to each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As Do not deduct the value of collateral value of collateral value of collateral. 2.1 Sentry Management Describe the property that secures the claim: 1530 Fort Johnson Road, Unit 2L Charleston, SC 29406 Number, Street, City, State 25 p. Code Who owes the debt? Check one. Part 2. Sentry Management Describe the property that secures the claim is: Check all that apply. Secured Code, if this is an amended filing Column A Column A Column A Column B Column B Column B Column B Column C VIII and Column B Column				Name			
United States Bankruptcy Court for the: DISTRICT OF SOUTH CAROLINA Case number ((Idmonin)		st Name	Middle Name Last	Name			
Case number (If known) Check if this is an amended filling							
Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space s needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. 1. Do any creditors have claims secured claims. If a creditor same particular claim, list the other creditors in Part 2. As amount of claim Do not deduct the value of collateral to a particular claim, list the other creditors in Part 2. As amount of claim Do not deduct the value of collateral to a	United States Bankrup	tcy Court for the:	DISTRICT OF SOUTH CAROLINA				
Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space s needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. 1. The page of the control of the creditor schedules. You have nothing else to report on this form. 1. The page of the control of the creditor schedules. You have nothing else to report on this form. 1. The page of the creditor schedules. You have nothing else to report on this form. 1. The page of the creditor schedules. You have nothing else to report on this form. 1. The page of the creditor schedules. You have nothing else to report on this form. 2. List all secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the other creditor's name. 2. List all secured claims. If a creditor has more than one secured claim, list the other creditor's name. 2. Sentry Management 1. The claim in alphabetical order according to the creditor's name. 2. Sentry Management 1. The claim in alphabetical order according to the creditor's name. 2. Sentry Management 1. The claim in alphabetical order according to the creditor's name. 2. Sentry Management 2. Column A Amount of claim 2. Column A Amount of claim 2. Amount of claim 2. Column A Amount of claim							
Schedule D: Creditors Who Have Claims Secured by Property Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space s needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims List All Secured Claims	(if known)					_	
Schedule D: Creditors Who Have Claims Secured by Property Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space s needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). It Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims. List All Secured Claims. If a creditor has more than one secured claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name. Describe the property that secures the claim: Sentry Management Describe the property that secures the claim: 1530 Fort Johnson Road, Unit 2L Charleston, SC 29412 Charleston, SC 29412 Charleston, SC 29412 Charleston, SC 29416 Number. Street, City, State & Zip Code Who owes the debt? Check one. Part 2: List All Secured Claims. So explain the claim is: Check all that apply. Debtor 1 only Debtor 2 only At least one of the debtors and another Under the claim is a laws to the debtor and another At least one of the debtors and another Check if this claim relates to a Other (including a right to offset) HOA						amend	ded filing
Schedule D: Creditors Who Have Claims Secured by Property Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space s needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). It Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims. List All Secured Claims. If a creditor has more than one secured claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name. Describe the property that secures the claim: Sentry Management Describe the property that secures the claim: 1530 Fort Johnson Road, Unit 2L Charleston, SC 29412 Charleston, SC 29412 Charleston, SC 29412 Charleston, SC 29416 Number. Street, City, State & Zip Code Who owes the debt? Check one. Part 2: List All Secured Claims. So explain the claim is: Check all that apply. Debtor 1 only Debtor 2 only At least one of the debtors and another Under the claim is a laws to the debtor and another At least one of the debtors and another Check if this claim relates to a Other (including a right to offset) HOA	Official Form 10	neD					
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space s needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). I. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Paral: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditors in Part 2. As mount of claim by not deduct the value of collateral. So not deduct the value of collateral that supports this claim of claims. If not deduct the value of collateral. So Fort Johnson Road, Unit 2L Charleston, SC 29412 Char			What Have Claims Ca		las e Durana andr	_	
s needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As mount of claim bo not deduct the value of collateral. Sentry Management Creditor's Name Describe the property that secures the claim: 1530 Fort Johnson Road, Unit 2L Charleston, SC 29412 Charlest	Schedule D:	Creditors	who have Claims Sec	curea	by Propert	<u>y</u>	12/15
In Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes, Fill in all of the information below. Yes, Fill in all of the information below.							
No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims	is needed, copy the Addi number (if known).	tional Page, fill it o	ut, number the entries, and attach it to this	s form. On t	ne top of any addition	iai pages, write your na	me and case
Text 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As mount of claim Do not deduct the value of collateral that supports this claim 2.1 Sentry Management 2.1 Sentry Management Creditor's Name Describe the property that secures the claim: 1530 Fort Johnson Road, Unit 2L Charleston, SC 29412 Charleston County TMS: 425-14-00-181 As of the date you file, the claim is: Check all that apply. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check iff this claim relates to a Column A Amount of claim Do not deduct the value of collateral that supports this claim as that supports this claim as the square of collateral that supports this claim. \$10,211.00 Value of collateral that supports this claim state to claim. \$10,211.00 \$10,211.00 \$10,211.00 \$10,211.00 \$10,211.00 \$10,211.00 \$10,211.00	1. Do any creditors have	claims secured by	your property?				
2. List All Secured Claims 2. List All Secured Claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As munt of claim to not deduct the value of collateral, that supports this claim bo not deduct the value of collateral. 2.1 Sentry Management Describe the property that secures the claim: 1530 Fort Johnson Road, Unit 2L Charleston, SC 29412 Charleston, SC	☐ No. Check this I	box and submit th	is form to the court with your other sche	dules. You	have nothing else to	report on this form.	
2. List All Secured Claims 2. List All Secured Claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As munt of claim to not deduct the value of collateral, that supports this claim bo not deduct the value of collateral. 2.1 Sentry Management Describe the property that secures the claim: 1530 Fort Johnson Road, Unit 2L Charleston, SC 29412 Charleston, SC	Yes. Fill in all of	f the information b	pelow.		-		
2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name. 2.1 Sentry Management Creditor's Name Describe the property that secures the claim: 1530 Fort Johnson Road, Unit 2L Charleston, SC 29412 Charleston County TMS: 425-14-00-181 As of the date you file, the claim is: Check all that apply. Mumber, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a Column A Amount of claim Do not deduct the value of collateral that supports this claim Do not deduct the value of collateral that supports this claim Do not deduct the value of collateral that supports this claim Do not deduct the value of collateral that supports this claim Do not deduct the value of collateral that supports this claim Do not deduct the value of collateral that supports this claim Do not deduct the value of collateral that supports this claim Do not deduct the value of collateral that supports this claim Do not deduct the value of collateral that supports this claim Do not deduct the value of collateral that supports this claim Do not deduct the value of collateral that supports this claim Do not deduct the value of collateral that supports this claim Do not deduct the value of collateral that supports this claim Do not deduct the value of collateral that supports this claim Do not deduct the value of collateral that supports this claim Do not deduct the value of collateral that supports the file of the value of collateral that supports the file of the value of collateral that supports the file of the value of collateral that supports the file of the value of collateral that supports the file of the value of collateral that supports the file of the value of collatera							
for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As a pount of claim Do not deduct the value of collateral that supports this claim Portion If any Sentry Management 2.1 Sentry Management Creditor's Name Describe the property that secures the claim: 1530 Fort Johnson Road, Unit 2L Charleston, SC 29412 Charleston County TMS: 425-14-00-181 As of the date you file, the claim is: Check all that apply. Contingent Unsecured portion If any S145,000.00 \$10,211.00 \$10,211.00 \$10,211.00 \$10,211.00 \$10,211.00 \$10,211.00					Column A	Column B	Column C
Sentry Management Describe the property that secures the claim: \$10,211.00 \$145,000.00 \$10,211.00					Amount of claim	Value of collateral	Unsecured
Describe the property that secures the claim: \$10,211.00 \$145,000.00 \$10,211.00 Statutory Name	much as possible, list the	claims in alphabetic	al order according to the creditor's name.				
Brigadier Condominiums 4925 Lacross Rd Init 112 Charleston, SC 29406 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a This: 425-14-00-181 As of the date you file, the claim is: Check all that apply. Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) HOA	2.1 Sentry Manage	ement	Describe the property that secures the cla	aim:			
Brigadier Condominiums 4925 Lacross Rd Init 112 Charleston, SC 29406 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a County TMS: 425-14-00-181 As of the date you file, the claim is: Check all that apply. Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) HOA	Creditor's Name		1530 Fort Johnson Road, Unit 2l				
Brigadier Condominiums 4925 Lacross Rd Init 112 Charleston, SC 29406 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a TMS: 425-14-00-181 As of the date you file, the claim is: Check all that apply. Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) HOA			•	n			
As of the date you file, the claim is: Check all that apply. Charleston, SC 29406 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only As of the date you file, the claim is: Check all that apply. Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another Check if this claim relates to a Other (including a right to offset) HOA							
Apply. Charleston, SC 29406 Number, Street, City, State & Zip Code Who owes the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim relates to a □ Other (including a right to offset) □ Contingent □ Unliquidated □ Disputed Nature of lien. Check all that apply. □ An agreement you made (such as mortgage or secured car loan) □ Statutory lien (such as tax lien, mechanic's lien) □ Judgment lien from a lawsuit □ Check if this claim relates to a □ Other (including a right to offset) □ HOA	•			all that			
Number, Street, City, State & Zip Code Unliquidated Disputed Nature of lien. Check all that apply. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another Check if this claim relates to a Unliquidated Siputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit HOA				ali triat			
Who owes the debt? Check one. □ Disputed Nature of lien. Check all that apply. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim relates to a □ Disputed Nature of lien. Check all that apply. □ An agreement you made (such as mortgage or secured car loan) □ Statutory lien (such as tax lien, mechanic's lien) □ Judgment lien from a lawsuit □ Check if this claim relates to a □ Other (including a right to offset) ■ HOA	Charleston, So	C 29406	☐ Contingent				
Who owes the debt? Check one. Nature of lien. Check all that apply. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim relates to a Nature of lien. Check all that apply. □ An agreement you made (such as mortgage or secured car loan) □ Statutory lien (such as tax lien, mechanic's lien) □ Judgment lien from a lawsuit □ Other (including a right to offset) HOA	Number, Street, City, S	State & Zip Code					
□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim relates to a □ Debtor 1 only □ An agreement you made (such as mortgage or secured car loan) □ Statutory lien (such as tax lien, mechanic's lien) □ Judgment lien from a lawsuit □ Other (including a right to offset) □ HOA	Who ower the debt?	NI					
□ Debtor 2 only car loan) □ Debtor 1 and Debtor 2 only □ Statutory lien (such as tax lien, mechanic's lien) □ At least one of the debtors and another □ Check if this claim relates to a □ Other (including a right to offset) HOA	_	neck one.	_				
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim relates to a □ Other (including a right to offset) □ HOA	_ ′		, ,	age or secur	ed		
☐ At least one of the debtors and another ☐ Check if this claim relates to a ☐ Other (including a right to offset) ☐ HOA ☐ HOA	•	Lonk	_ ′	da lian)			
☐ Check if this claim relates to a ☐ Other (including a right to offset) HOA	_		_ ' ` `	s lien)			
	☐ Check if this claim re			4			

Date debt was incurred

Last 4 digits of account number

Case 21-01750-dd Doc 1 Filed 07/01/21 Entered 07/01/21 13:12:53 Desc Main Document Page 19 of 59

Debtor 1 Celeste Danielle Yelving	gton	Case number (if known)			
First Name Middle N	ame Last Name				
Specialized Loan Servicing LLC	Describe the property that secures the claim:	\$146,998.00	\$145,000.00	\$1,998.00	
Creditor's Name 8742 Lucent Blvd Suite 300 Highlands Ranch, CO 80129 Number, Street, City, State & Zip Code Who owes the debt? Check one.	T530 Fort Johnson Road, Unit 2L Charleston, SC 29412 Charleston County TMS: 425-14-00-181 As of the date you file, the claim is: Check all that apply. ☐ Contingent ☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply.				
■ Debtor 1 only □ Debtor 2 only	An agreement you made (such as mortgage or car loan)	secured			
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a	☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit ☐ Other (including a right to offset) ☐ Mortgag				
community debt Date debt was incurred 06/2018	Last 4 digits of account number 419	5			
Add the dollar value of your entries in C If this is the last page of your form, add Write that number here:	column A on this page. Write that number here: the dollar value totals from all pages.	\$157,209. \$157,209.			

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Case 21-01750-dd Doc 1 Filed 07/01/21 Entered 07/01/21 13:12:53 Desc Main Document Page 20 of 59

			Document	Page 20 of	59		
Fill in t	this informa	ation to identify your c	ase:				
Debtor	1	Celeste Danielle Y	'elvington				
20210.		First Name	Middle Name	Last Name			
Debtor		Elect Name	Middle Name	Last Name			
(Spouse i	ir, tiling)	First Name	Middle Name	Last Name			
United	States Bank	kruptcy Court for the:	DISTRICT OF SOUTH CARC	OLINA			
Case n	umber						
(if known))					☐ Chec	ck if this is an
						ame	nded filing
Offici	al Form	106F/F					
			ho Have Unsecured	d Claims			12/15
			Part 1 for creditors with PRIOR		Man and discussible NON	DDIODITY -I-i	
Part 1:	List All	per (if known). of Your PRIORITY Uns s have priority unsecured					
_	No. Go to Par		i olamo agamot you .				
	Yes.						
ider pos Par	ntify what type sible, list the t 1. If more th	e of claim it is. If a claim has claims in alphabetical order an one creditor holds a par	. If a creditor has more than one pr s both priority and nonpriority amou r according to the creditor's name. ticular claim, list the other creditors ee the instructions for this form in the	unts, list that claim here If you have more than s in Part 3.	e and show both priority a two priority unsecured cla	and nonpriority amou	unts. As much as
(. 5	. a.r oxpianat	on or each type or elaini, or			Total claim	Priority	Nonpriority
2.1	IRS*		Last 4 digits of acco	ount number	\$0.00	amount \$0.0	amount 0 \$0.00
	Priority Cred						
	Centraliz Operatio	ed Insolvency	When was the debt i	incurred?		-	
	PO BOX						
		LPHIA, PA 19101-7					
w		eet City State Zip Code the debt? Check one.		ile, the claim is: Chec	k all that apply		
_	_		☐ Contingent				
_	Debtor 1 on		☐ Unliquidated				
	Debtor 2 on		☐ Disputed				
		d Debtor 2 only	Type of PRIORITY u				
	_	of the debtors and another		· ·			
		is claim is for a commun	= -	other debts you owe to or personal injury while			
_	_	bject to offset?	Liaims for death of	n personai injury while	you were intoxicated		
	No		Пан а н				

Entered 07/01/21 13:12:53 Filed 07/01/21 Case 21-01750-dd Doc 1 Document Page 21 of 59 Debtor 1 Celeste Danielle Yelvington Case number (if known) 2.2 \$0.00 \$0.00 SC Department of Revenue Last 4 digits of account number \$0.00 Priority Creditor's Name P. O. Box 12265 When was the debt incurred? Columbia, SC 29211-2265 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Domestic support obligations ☐ At least one of the debtors and another Taxes and certain other debts you owe the government ☐ Check if this claim is for a community debt ☐ Claims for death or personal injury while you were intoxicated Is the claim subject to offset? ■ No ☐ Other. Specify ☐ Yes Part 2: List All of Your NONPRIORITY Unsecured Claims

. Do any creditors have nonpriority unsecured claims against you?							
☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.							
I	Yes.						
t	List all of your nonpriority unsecured claims in the all insecured claim, list the creditor separately for each claim than one creditor holds a particular claim, list the other credit 2.	m. For each claim listed, identify what t	ype of claim it is. Do not list claims already inc	cluded in Part 1. If more			
				Total claim			
.1	1st Franklin Financial	Last 4 digits of account number	4007	\$1,742.00			
	Nonpriority Creditor's Name PO Box 31231	When was the debt incurred?	4/2019				
	Charleston, SC 29417-1231	When was the dest meaned?	4/2013	_			
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply				
	Who incurred the debt? Check one.						
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community ☐ Student loans						
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts					
	Yes	Other. Specify Personal lo	an	-			

Case 21-01750-dd Doc 1 Filed 07/01/21 Entered 07/01/21 13:12:53 Desc Main Document Page 22 of 59

Calesta Panielle Valvington

Case number (if known)

	Celeste Danielle Yelvington	Case number (if known)	
4.2	Amex Nonpriority Creditor's Name	Last 4 digits of account number 5673	\$4,627.00
	Po Box 297871	When was the debt incurred? 9/2013	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit card	
4.3	Charleston Water System	Last 4 digits of account number 9225	\$374.00
	Nonpriority Creditor's Name 103 St. Phillip St Charleston, SC 29403	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Utility	
4.4	Chase	Last 4 digits of account number	\$6,042.00
	Nonpriority Creditor's Name PO Box 15369 Wilmington DE 10950	When was the debt incurred? 10/2018	
	Wilmington, DE 19850 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit card	

Celeste Danielle Yelvington	Case number (if known)	
Enterprise Rent-A-Car Nonpriority Creditor's Name	Last 4 digits of account number	\$800.00
600 Corporate Park Drive St Saint Louis, MO 63105	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
debt s the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Rental car	
Honda Financial Services	Last 4 digits of account number	\$6,000.00
Nonpriority Creditor's Name 20800 Madrona Avenue Forrance, CA 90503	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
/ho incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
ebt the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
☐Yes	Repossessed vehicle 2017 Honda CR-V, value \$10,000 (wrecked)	
lames Island PSD	Last 4 digits of account number 6945	\$1,205.00
Nonpriority Creditor's Name PO Box 13569 Charleston, SC 29422	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
•	Student loans	
	Obligations arising out of a separation agreement or divorce that you did not	
<u> </u>		
At least one of the debtors and another Check if this claim is for a community debt ls the claim subject to offset? No Yes	Type of NONPRIORITY unsecured claim: Student loans	

Case 21-01750-dd Doc 1 Filed 07/01/21 Entered 07/01/21 13:12:53 Desc Main Document Page 24 of 59

Celeste Danielle Yelvington	Case number (if known)	
Medicredit Inc. Nonpriority Creditor's Name	Last 4 digits of account number	\$3,494.00
P.O. Box 1629	When was the debt incurred? 9/2020	
Maryland Heights, MO 63043-0629	<u></u>	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	\square Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	Other. Specify Medical	
Medicredit Inc.	Last 4 digits of account number	\$1,846.00
Nonpriority Creditor's Name P.O. Box 1629	When was the debt incurred? 7/2020	
Maryland Heights, MO 63043-0629 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	The of the unit you me, the diameter of the charactery	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Medical	
Medicredit Inc.	Last 4 digits of account number	\$1,016.00
Nonpriority Creditor's Name		. ,
P.O. Box 1629	When was the debt incurred? 7/2020	
Maryland Heights, MO 63043-0629 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the stant is. Oncok an that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Medical	

Case 21-01750-dd Doc 1 Filed 07/01/21 Entered 07/01/21 13:12:53 Desc Main Document Page 25 of 59

Calesta Panielle Velvington

Case number (if known)

Jebu	Celeste Danielle Yelvington	Case number (if known)	
1.1 I	Medicredit Inc. Nonpriority Creditor's Name	Last 4 digits of account number	\$636.00
	P.O. Box 1629 Maryland Heights, MO 63043-0629	When was the debt incurred? 7/2020	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community	☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans	
	debt Is the claim subject to offset? ■ No	 ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts 	
	☐ Yes	■ Other. Specify Medical	
1.1	Medicredit Inc.	Last 4 digits of account number	\$538.00
	Nonpriority Creditor's Name P.O. Box 1629 Maryland Heights, MO 63043-0629	When was the debt incurred? 9/2020	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No □ Yes	☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical	
l.1	Medicredit Inc.		\$449.00
3	Nonpriority Creditor's Name P.O. Box 1629 Maryland Heights, MO 63043-0629	Last 4 digits of account number When was the debt incurred? 11/2020	Ψ+13.00
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent	
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No □ Yes	Debts to pension or profit-sharing plans, and other similar debts Other Specify Medical	

Case 21-01750-dd Doc 1 Filed 07/01/21 Entered 07/01/21 13:12:53 Desc Main Document Page 26 of 59

Case number (if known)

Deb	Celeste Danielle Yelvington	Case number (if known)	
4.1 4	Medicredit Inc.	Last 4 digits of account number	\$290.00
	Nonpriority Creditor's Name P.O. Box 1629	When was the debt incurred? 9/2020	
	Maryland Heights, MO 63043-0629 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	\square Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Medical	
4.1	Medicredit Inc.		\$253.00
5	Nonpriority Creditor's Name	Last 4 digits of account number	Ψ233.00
	P.O. Box 1629	When was the debt incurred? 7/2020	
	Maryland Heights, MO 63043-0629 Number Street City State Zip Code	As of the date was file the plain in O	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
		☐ Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical	
4.1	Medicredit Inc.	Last 4 digits of account number	\$250.00
6	Nonpriority Creditor's Name		4 200.00
	P.O. Box 1629	When was the debt incurred? 7/2020	
	Maryland Heights, MO 63043-0629 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. Oneon all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	\square Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other Specify Medical	

Case 21-01750-dd Doc 1 Filed 07/01/21 Entered 07/01/21 13:12:53 Desc Main Document Page 27 of 59

Debio	Celeste Danielle Yelvington	Case number (if known)	
4.1	Medicredit Inc.	Last 4 digits of account number	\$214.00
,	Nonpriority Creditor's Name		
	P.O. Box 1629	When was the debt incurred? 7/2020	
	Maryland Heights, MO 63043-0629 Number Street City State Zip Code	As of the date you file the claim is Check all that apply	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
		_	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	■ Other. Specify Medical	
4.1	Medicredit Inc.	Last 4 digits of account number	\$182.00
8	Nonpriority Creditor's Name		
	P.O. Box 1629	When was the debt incurred? 11/2020	
	Maryland Heights, MO 63043-0629		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical	
4.1			
9	Midland Credit Management	Last 4 digits of account number	\$3,659.00
	Nonpriority Creditor's Name 320 E Big Beaver Rd Ste 300 Troy, MI 48083	When was the debt incurred? 12/2020	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other Specify Capital One credit card	

Debto	Celeste Danielle Yelvington	Case number (if known)				
4.2	Midland Credit Management	Last 4 digits of account number	\$714.00			
0	Nonpriority Creditor's Name					
	320 E Big Beaver Rd Ste 300 Troy, MI 48083	When was the debt incurred? 10/2019				
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	<u></u>	☐ Student loans				
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify Credit One credit card				
4.2	Portfolio Recovery Associates LLC	Last 4 digits of account number 7695	\$5,817.00			
	Nonpriority Creditor's Name					
	120 Corporate Blvd	When was the debt incurred? 10/2019				
	Norfolk, VA 23502 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.	As of the date you me, the claim is. Check all that apply				
	Debtor 1 only	Continued.				
	_	Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community debt	☐ Student loans				
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	<u> </u>					
	Yes	■ Other. Specify Synchrony Bank credit card				
4.2	Portfolio Recovery Associates LLC	Last 4 digits of account number 9867	\$1,219.00			
2	Nonpriority Creditor's Name	Last 4 digits of account number	Ψ.,Ξ.σ.σσ			
	120 Corporate Blvd	When was the debt incurred? 1/2020				
	Norfolk, VA 23502					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	<u> </u>					
	Debtor 1 only	Contingent				
	Debtor 2 only	Unliquidated				
	☐ Debtor 1 and Debtor 2 only	Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt	Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	□Yes	■ Other, Specify Synchrony Bank credit card				

Case 21-01750-dd Doc 1 Filed 07/01/21 Entered 07/01/21 13:12:53 Desc Main Document Page 29 of 59

Debtor '	Celeste D	Danielle Yelvington		Case no	umber (if known)			
4.2	The Bureau	ıs Inc	Last 4 digits of account number			\$581.00		
	Nonpriority Cree 650 Dundee Northbrook	e Rd Ste 370	When was the debt incurred?	10/20	019	_		
_	Number Street	City State Zip Code the debt? Check one.	As of the date you file, the claim	is: Check	k all that apply			
	■ Debtor 1 on		☐ Contingent					
	Debtor 2 on		☐ Unliquidated					
	Debtor 1 an		☐ Disputed					
		of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
			Student loans					
	debt	is claim is for a community	☐ Obligations arising out of a sepa	aration ac	greement or divorce that you did not			
		bject to offset?	report as priority claims	aralion aç	greement of divorce that you did not	•		
	No		☐ Debts to pension or profit-sharing	ng plans,	and other similar debts			
	☐ Yes		Other. Specify Comenity E	Bank c	redit card	_		
4.2	WF/Preferr		Last 4 digits of account number	9959		\$3,880.00		
	Nonpriority Cree PO Box 145	517	When was the debt incurred?	7/201	18	_		
	Des Moines Number Street	City State Zip Code	As of the date you file, the claim	is: Check	k all that apply			
		the debt? Check one.	,	01.00.	it all that apply			
	■ Debtor 1 only		☐ Contingent					
	Debtor 2 on		☐ Unliquidated					
	_	•	□ Disputed					
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another		Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community		☐ Student loans					
	debt		☐ Obligations arising out of a separation agreement or divorce that you did not					
	Is the claim su	bject to offset?	report as priority claims		, ,			
	■ No		Debts to pension or profit-sharing	ng plans,	and other similar debts			
	☐ Yes		Other. Specify Credit card					
is tryin have m notified Part 4:	is page only if yag to collect from one than one of for any debts Add the A	m you for a debt you owe to som creditor for any of the debts that y s in Parts 1 or 2, do not fill out or mounts for Each Type of Uns	out your bankruptcy, for a debt that y eone else, list the original creditor in ou listed in Parts 1 or 2, list the addi submit this page.	n Parts 1 itional cr	or 2, then list the collection ager reditors here. If you do not have a	cy here. Similarly, if you dditional persons to be		
type of	f unsecured cla	aim.						
				-	Total Claim			
Total claims	6a.	Domestic support obligations		6a.	\$ 0.0	<u>0</u>		
from Par	r t 1 6b.	Taxes and certain other debts y	ou owe the government	6b.	\$0.0	0		
	6c.	Claims for death or personal in		6c.	\$ 0.0			
	6d.	Other. Add all other priority unsec	cured claims. Write that amount here.	6d.	\$	<u>0</u>		
	6e.	Total Priority. Add lines 6a throu	gh 6d.	6e.	\$	0		
					Total Claim			
Total claims	6f.	Student loans		6f.	\$	<u>0</u>		
from Par	r t 2 6g.	Obligations arising out of a sep you did not report as priority cl	paration agreement or divorce that aims	6g.	\$	0		

Official Form 106 E/F

Debts to pension or profit-sharing plans, and other similar debts

0.00

Case 21-01750-dd Doc 1 Filed 07/01/21 Entered 07/01/21 13:12:53 Desc Main Document Page 30 of 59

Debtor 1 Celeste Danielle Yelvington

Case number (if known)

6j.

6i. Other. Add all other nonpriority unsecured claims. Write that amount here. \$ 45,828.00

6j. Total Nonpriority. Add lines 6f through 6i.

\$ 45,828.00

Case 21-01750-dd Doc 1 Filed 07/01/21 Entered 07/01/21 13:12:53 Desc Main Document Page 31 of 59

Fill in this infor				
Debtor 1	Celeste Danielle	Yelvington		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		DISTRICT OF SOUTH (CAROLINA	
Case number				Chook if this is an
(ii kilowii)				Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Number	h whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3					
0	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.4	•				
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	<u> </u>
	٠,		3. 3	0000	

Case 21-01750-dd Doc 1 Filed 07/01/21 Entered 07/01/21 13:12:53 Desc Main Document Page 32 of 59

		Docume	nt Page 32 0	1 59	
Fill in this	s information to identify your	case:			
Debtor 1	Calaata Daniella	Valuington			
Debioi i	Celeste Danielle First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, fil	ing) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	DISTRICT OF SOUTH	CAROLINA		
Case num	nber				
(if known)					Check if this is an
					amended filing
Officia	l Form 106H				
		-1-4			
Sched	dule H: Your Cod	eptors			12/15
fill it out, a your name	and number the entries in the e and case number (if known	boxes on the left. Attack . Answer every question	n the Additional Page t i.	o this page. On the top	eded, copy the Additional Page, of any Additional Pages, write
1. Do	you have any codebtors? (If	you are filing a joint case,	do not list either spouse	as a codebtor.	
■ No □ Ye					
Arizo	thin the last 8 years, have you na, California, Idaho, Louisiana . Go to line 3. s. Did your spouse, former spo	, Nevada, New Mexico, Pัเ	ierto Rico, Texas, Wash		states and territories include
	3. Dia your spouse, former spo	use, or legal equivalent liv	e with you at the time:		
in line Form	e 2 again as a codebtor only i	f that person is a guarar	ntor or cosigner. Make	sure you have listed the	with you. List the person shown e creditor on Schedule D (Official chedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The cred Check all schedules	litor to whom you owe the debt that apply:
				_	,
3.1	Nama			_ Grand Schedule D, line	
	Name			☐ Schedule E/F, lin	· · · · · · · · · · · · · · · · · · ·
				☐ Schedule G, line	
	Number Street			_	
	City	State	ZIP Code		
				Поделе	
3.2	Name			Schedule D, line	
				☐ Schedule E/F, lin	
				☐ Schedule G, line	
	Number Street			_	
	City	State	ZIP Code		

Case 21-01750-dd Doc 1 Filed 07/01/21 Entered 07/01/21 13:12:53 Desc Main Document Page 33 of 59

E:III	in this information to identif	iv vour oo					1				
			elle Yelvington								
	otor 2 puse, if filing)										
Uni	ted States Bankruptcy Cou	rt for the:	DISTRICT OF SOUTH	H CAROLINA							
	se number nown)						□ A		ed filing ent showin	g postpetition ollowing date:	
0	fficial Form 106	<u>l</u>					N	IM / DD/ Y	/YYY		
S	chedule I: You	r Inco	ome								12/15
spo atta	plying correct information use. If you are separated ch a separate sheet to thing the transfer of the transfer	and your	spouse is not filing wi	th you, do not inclu onal pages, write yo	ıde infor	mati	on about	your speumber (if	ouse. If me known). <i>A</i>	ore space is answer every	needed,
	information.			Debtor 1				Debtor 2 or non-filing spouse ☐ Employed			
	If you have more than one job, attach a separate page with information about additional	rith	Employment status	■ Employed□ Not employed				•	employed		
	employers.		Occupation	Sales associate							
	Include part-time, season self-employed work.	al, or	Employer's name	Lowe's Home C	enters	, LL	<u> </u>				
	Occupation may include sor homemaker, if it applie		Employer's address	1000 Lowe's Bo Mooresville, NO			.0				
			How long employed to	nere? 4 mont	hs			_			
Par	t 2: Give Details Ab	out Mon	thly Income								
	mate monthly income as use unless you are separate		te you file this form. If y	you have nothing to ı	eport for	any	line, write	s \$0 in the	space. In	clude your no	n-filing
	u or your non-filing spouse e space, attach a separate			embine the information	on for all	empl	oyers for	that perso	on on the li	nes below. If	you need
							For Del	otor 1		btor 2 or ng spouse	
2.	List monthly gross wag deductions). If not paid m				2.	\$	1	,796.43	\$	N/A	
3.	Estimate and list month	ıly overti	me pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income	. Add lin	e 2 + line 3.		4.	\$	1,79	96.43	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

Debtor 1	Celeste Danielle Yelvington	-	Case n	umber (if known)				
			For I	Debtor 1		otor 2 or ng spouse		
Co	ppy line 4 here	4.	\$	1,796.43	\$	N/A		
5. Li :	st all payroll deductions:							
5a	Tax, Medicare, and Social Security deductions	5a.	\$	299.67	\$	N/A		
5b	•	5b.	\$	0.00	\$	N/A		
5c	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A		
5d	Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A		
5e		5e.	\$	0.00	\$	N/A		
5f.	•	5f.	\$	0.00	\$	N/A		
5g		5g.	\$	0.00	\$	N/A		
5h		_ 5h.+	· · ·	0.00		N/A		
6. A c	dd the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	299.67	\$	N/A		
7. C a	alculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	1,496.76	\$	N/A		
8. Li : 8a	profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total							
	monthly net income.	8a.	\$	0.00	\$	N/A		
8b		8b.	\$	0.00	\$	N/A_		
8c	 Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 	8c.	\$	0.00	\$	N/A		
8d		8d.	\$ 	0.00	\$	N/A		
8e		8e.	\$	0.00	\$	N/A		
8f.	· · · · · · · · · · · · · · · · · · ·	8f.	\$	0.00	\$	N/A		
8g		_ 8g.	\$	0.00	\$	N/A		
8h		8h.+	\$	0.00	- \$	N/A		
9. A o	dd all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A		
10 C s	alculate monthly income. Add line 7 + line 9.	10. \$	1	,496.76 + \$	N	/A = \$ 1,496.76		
	Id the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	'ο. Ψ	- '	, 490.70 + + -	IN .	- Ψ - 1,490.70		
11. St Ind oth Do	State all other regular contributions to the expenses that you list in <i>Schedule J</i> . Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in <i>Schedule J</i> . Specify: 11. +\$ 0.							
W	dd the amount in the last column of line 10 to the amount in line 11. The resrite that amount on the Summary of Schedules and Statistical Summary of Certainplies				if it	12. \$1,496.76		
13 D .	you expect an increase or decrease within the year after you file this form	2				monthly income		
13. Do ■ □	No. Yes. Explain:	•						

Official Form 106l Schedule I: Your Income page 2

Fill	in this informa	tion to identify yo	our case:					
Deb	otor 1	Celeste Dan	ielle Yelv	ington		Chec	ck if this is:	
Dob	otor O						An amended filing	
	otor 2 ouse, if filing)						13 expenses as of	ving postpetition chapter the following date:
Unit	ted States Bankr	ruptcy Court for the	: DISTRI	CT OF SOUTH CAROLIN	Α	-	MM / DD / YYYY	
Cas	se number							
(If k	nown)							
Of	fficial Fo	rm 106J						
Sc	chedule	J: Your	Exper	ises				12/15
Be info	as complete a	and accurate as	possible.	If two married people a ch another sheet to this	re filing together, be form. On the top of	oth are equ f any additio	ally responsible fo onal pages, write y	or supplying correct your name and case
Par		ibe Your House	ehold					
1.	Is this a joir							
	■ No. Go to		in a sonar	ate household?				
	□ res. Doe		iii a sepai	ate nousenoid?				
			st file Offici	al Form 106J-2, <i>Expenses</i>	s for Separate House	ehold of Deb	tor 2.	
2.	Do you have	e dependents?	■ No					
	Do not list Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.						☐ Yes
								□ No
								☐ Yes ☐ No
								☐ Yes
								□ No
								☐ Yes
3.	expenses of	penses include f people other t d your depende	han $_{f \Box}$	No Yes				
		ate Your Ongoi			OH are heine this f	orm 22 2 2:	poloment in a Ch	untor 12 ages to remark
exp				uptcy filing date unless y y is filed. If this is a supp				
				government assistance is luded it on Schedule I:				
(Of	ficial Form 10	06I.)					Your expo	enses
4.		or home owners		ses for your residence. I r lot.	Include first mortgag	e 4. \$	i	440.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a. \$		0.00
	•	rty, homeowner's				4b. \$		0.00
			•	ipkeep expenses		4c. \$		0.00
5.		owner's associat		dominium dues D ur residence. such as ho	ome equity loans	4d. \$ 5. \$		0.00

Case 21-01750-dd Doc 1 Filed 07/01/21 Entered 07/01/21 13:12:53 Desc Main Document Page 36 of 59

Debtor '	Celeste Danielle Yelvingto	<u>n</u>	Case num	ber (if known)				
6. Ut i	ilities:							
6a.			6a.	\$	0.00			
6b.		n	6b.		0.00			
6c.			6c.	·	60.00			
6d.		Satellite, and sable services	6d.	· ·	0.00			
	od and housekeeping supplies		7.	·	400.00			
	ildcare and children's education	acata	8.	·				
_		COSIS	o. 9.	\$	0.00			
	othing, laundry, and dry cleaning rsonal care products and service	_		· -	75.00			
	•	S	10.	·	40.00			
	dical and dental expenses		11.	\$	40.00			
	ansportation. Include gas, mainten	ance, bus or train fare.	12.	\$	200.00			
	not include car payments.	weneners magazines and books	13.					
		ewspapers, magazines, and books		· -	110.00			
	aritable contributions and religio	us donations	14.	\$	0.00			
	surance.	m your pay or included in lines 4 or 00						
		m your pay or included in lines 4 or 20.	150	¢	0.00			
	a. Life insurance		15a.	· ·	0.00			
	b. Health insurance		15b.	· ·	0.00			
	c. Vehicle insurance		15c.	·	125.00			
	d. Other insurance. Specify:		15d.	\$	0.00			
		from your pay or included in lines 4 or 20.						
Sp	ecify: Vehicle taxes		16.	\$	2.00			
	stallment or lease payments:							
17	 a. Car payments for Vehicle 1 		17a.	\$	0.00			
17	 b. Car payments for Vehicle 2 		17b.	\$	0.00			
17	c. Other. Specify:		17c.	\$	0.00			
17	d. Other. Specify:		17d.	\$	0.00			
		ance, and support that you did not repo	ort as	· -				
		chedule I, Your Income (Official Form 1		\$	0.00			
9. Ot l	her payments you make to suppo	rt others who do not live with you.	•	\$	0.00			
Sp	ecify:		19.					
). O t	her real property expenses not in	cluded in lines 4 or 5 of this form or on	Schedule I: Yo	our Income.				
20	a. Mortgages on other property		20a.	\$	0.00			
20	b. Real estate taxes		20b.	\$	0.00			
20	c. Property, homeowner's, or rente	er's insurance	20c.	\$	0.00			
	d. Maintenance, repair, and upkee		20d.	\$	0.00			
	e. Homeowner's association or cor		20e.		0.00			
	her: Specify:			+\$	0.00			
. 01	mer. Specify.			-Ψ	0.00			
2. Ca	Iculate your monthly expenses							
	a. Add lines 4 through 21.			\$	1,492.00			
22	b. Copy line 22 (monthly expenses t	for Debtor 2), if any, from Official Form 106	6J-2	\$				
	c. Add line 22a and 22b. The result			\$	1,492.00			
22	o. Add iiilo 22a ailu 22b. Tile lesull	is your monuny expenses.		Ψ	1,492.00			
3. Ca	Iculate your monthly net income.							
	a. Copy line 12 (your combined mo		23a.	\$	1,496.76			
	b. Copy your monthly expenses from	· · · · · · · · · · · · · · · · · · ·	23b.		1,492.00			
			235.	*	1,732.00			
23	c. Subtract your monthly expenses	s from your monthly income						
20	The result is your <i>monthly net in</i>		23c.	\$	4.76			
				1				
4. Do	you expect an increase or decre	ase in your expenses within the year af	ter you file this	s form?				
	or example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of							
mo	dification to the terms of your mortgage?							
	No.							
	Yes. Explain here:							

Case 21-01750-dd Doc 1 Filed 07/01/21 Entered 07/01/21 13:12:53 Desc Main Document Page 37 of 59

Fill in this info	rmation to identify your	case:				
Debtor 1	Celeste Danielle					
.	First Name	Middle Name	Last N	ame		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last N	ame		
,,		DIOTRIOT OF COLUT				
United States E	Bankruptcy Court for the:	DISTRICT OF SOUTH	CAROLINA			
Case number						
(if known)						☐ Check if this is an
						amended filing
O#:-:-!	400D					
	rm 106Dec					
Declara	ition About a	an Individua	I Debto	r's Sche	dules	12/15
	people are filing togethe					
obtaining mone		n connection with a bar				ement, concealing property, or 00, or imprisonment for up to 20
Si	gn Below					
Did you p	pay or agree to pay some	one who is NOT an atto	orney to help y	ou fill out bankrı	uptcy forms?	
■ No						
☐ Yes.	Name of person				Attach Bani	kruptcy Petition Preparer's Notice,
_	· —					, and Signature (Official Form 119)
	nalty of perjury, I declare are true and correct.	that I have read the sur	mmary and sch	edules filed witl	h this declaration	on and
Y 1.10	Lara Bartalla Valita	. 4	v			
	eleste Danielle Yelving ste Danielle Yelvingtoi		X _	ignature of Debto	or 2	
	ture of Debtor 1	11		ignature or Debit	UI <u>Z</u>	
Date	July 1, 2021		Г	ate		

Fill	in this inform	ation to identify you	r case:			
Deb	otor 1	Celeste Danielle	Yelvington Middle Name	Last Name		
Deb	otor 2	i list Name	Middle Name	Last Name		
(Spo	ouse if, filing)	First Name	Middle Name	Last Name		
Uni	ted States Ban	kruptcy Court for the:	DISTRICT OF SOUTH C	AROLINA		
Cas	se number					
(if kn	nown)				_	Check if this is an Imended filing
						interided hilling
∩f	ficial For	m 107				
			Δffairs for Indivi	duals Filing for B	ankruntov	4/19
Be a info num	as complete ar rmation. If mo nber (if known	nd accurate as possi ore space is needed,). Answer every que	ble. If two married people attach a separate sheet to stion.	are filing together, both are this form. On the top of an	equally responsible for sup y additional pages, write you	
Par	rt 1: Give De	etails About Your Ma	rital Status and Where You	u Lived Before		
1.	What is your	current marital statu	is?			
	☐ Married■ Not marr	ied				
2.	During the la	st 3 years, have you	lived anywhere other than	where you live now?		
	□ No					
	_	all of the places you I	ived in the last 3 years. Do n	ot include where you live nov	I.	
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	Idress:	Dates Debtor 2 lived there
	1530 Fort J Charleston	lohnson Road, Un , SC 29412	it 2L From-To: 6/2018-8/2020	☐ Same as Debtor	1	☐ Same as Debtor 1 From-To:
3. state	es and territorie	es include Arizona, Ca		vada, New Mexico, Puerto R	ity property state or territor ico, Texas, Washington and W	
Par	t 2 Explain	the Sources of You	r Income			
4.	Fill in the total	amount of income yo	u received from all jobs and	ng a business during this yeall businesses, including part re together, list it only once ur		ndar years?
	□ No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until I for bankruptcy:	■ Wages, commissions, bonuses, tips	\$8,196.79	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Case 21-01750-dd Doc 1 Filed 07/01/21 Entered 07/01/21 13:12:53 Desc Main Document Page 39 of 59

				Debtor 1			Debtor 2		
				Sources of income Check all that apply.	Gross inco (before dec exclusions)	ductions and	Sources of inc Check all that a		Gross income (before deductions and exclusions)
		dar year be December		■ Wages, commissions, bonuses, tips		\$6,094.00	☐ Wages, com bonuses, tips	missions,	
				☐ Operating a business			☐ Operating a	business	
5.	Include include and other winnings. List each s	come regard public bene If you are fil	fless of whet fit payments; ing a joint ca the gross inc	e during this year or the two her that income is taxable. Ex pensions; rental income; inte se and you have income that ome from each source separa	camples of <i>othe</i> erest; dividends you received to	er income are a ; money collect ogether, list it o	alimony; child supp sted from lawsuits; only once under De	royalties; a ebtor 1.	
				Debtor 1 Sources of income Describe below.	Gross inco each sour (before dec exclusions)	ce ductions and	Debtor 2 Sources of inc Describe below		Gross income (before deductions and exclusions)
Pa	rt 3: List	t Certain Pa	yments You	Made Before You Filed for	Bankruptcy				
).	Are either ☐ No.	Neither Deindividual puring the No.	ebtor 1 nor I primarily for a 90 days before Go to line 7 List below paid that controlled	2's debts primarily consume Debtor 2 has primarily cons a personal, family, or househouse ore you filed for bankruptcy, do 7. each creditor to whom you pareditor. Do not include payme payments to an attorney for att on 4/01/22 and every 3 year	sumer debts. Cold purpose." did you pay any aid a total of \$6 ants for domestithis bankruptcy	creditor a tota ,825* or more c support oblig case.	il of \$6,825* or moi in one or more pay gations, such as ch	re? ments and ild support	the total amount you and alimony. Also, do
	Yes.			or both have primarily consore you filed for bankruptcy, d		creditor a tota	ıl of \$600 or more?		
		■ No.	Go to line	7.					
		□ _{Yes}	include pay	each creditor to whom you pa yments for domestic support o r this bankruptcy case.					
	Creditor'	s Name and	d Address	Dates of payme	ent To	tal amount paid	Amount you still owe	Was this	payment for
7.	Insiders in of which ye	iclude your r ou are an of	elatives; any ficer, directo	r bankruptcy, did you make general partners; relatives of r, person in control, or owner proprietor. 11 U.S.C. § 101. In	f any general p of 20% or more	a debt you o artners; partne of their voting	wed anyone who erships of which you g securities; and ar	u are a ger ny managin	neral partner; corporation g agent, including one fo
	■ No	List all navn	nents to an ir	nsider					

Case 21-01750-dd Doc 1 Filed 07/01/21 Entered 07/01/21 13:12:53 Desc Main Document Page 40 of 59

Debtor 1 Celeste Danielle Yelvington Case number (if known)

8.	Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cos		ments or transfer a	any property on	account of a del	ot that benefited ar
	No					
	☐ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for the Include credit	
Pai	rt 4: Identify Legal Actions, Repossession	ns, and Foreclosures				
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes.					
	□ No					
	Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of the	case
	Brigadier Condominium Association, Inc. vs. Celeste D. Yelvington 2019CP1004181	Foreclosure	Charleston County Clerk of Court Attn: Accounting 100 Broad Street, Suite 106 Charleston, SC 29401		■ Pending □ On appea □ Conclude	
	Specialized Loan Servicing LLC vs. Celeste D. Yelvington 2019CP1006018	Foreclosure	Charleston County Clerk of Court Attn: Accounting 100 Broad Street, Suite 106 Charleston, SC 29401		■ Pending □ On appea □ Conclude	
10.	Within 1 year before you filed for bankruptor. Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Creditor Name and Address		erty repossessed, f	oreclosed, garn		Value of the
		Fundain what have and				property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment beca ■ No □ Yes. Fill in the details.			nancial institutio	on, set off any an	nounts from your
	Creditor Name and Address	Describe the action the	creditor took	Date take	e action was	Amount
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or all ■ No □ Yes		erty in the possess	ion of an assign	ee for the benef	it of creditors, a

List Certain Gifts and Contribution 2 years before you filed for bankre 2 ses. Fill in the details for each gift.	s uptcy, did you give any gifts with a total value of more		
	uptcy, did you give any gifts with a total value of more		
is. Fill III life delalis loi eacif dill.		than \$600 per person?	?
with a total value of more than \$60 erson n to Whom You Gave the Gift and	0 Describe the gifts	Dates you gave the gifts	Value
		tal value of more than	\$600 to any charity?
or contributions to charities that than \$600 y's Name	otal Describe what you contributed	Dates you contributed	Value
List Certain Losses			
1 year before you filed for bankru bling?	ptcy or since you filed for bankruptcy, did you lose an	ything because of thef	t, fire, other disaster
os. Fill in the details.			
ibe the property you lost and he loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property</i> .	Date of your loss	Value of property lost
ist Certain Payments or Transfers	\$		
ted about seeking bankruptcy or p	preparing a bankruptcy petition?		rty to anyone you
o es. Fill in the details.			
n Who Was Paid ss or website address n Who Made the Payment, if Not Y	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Iman Law Firm, P.A. Rivers Ave eston, SC 29406	Filing fee \$338, Credit report \$35, Attorney fees \$1,627	6/30/2021	\$2,000.00
ySharp Credit Counseling, Inc N. Fairfield Ave Suite 200 ngo, IL 60647	c. Credit Counseling Course	6/29/2021	\$10.00
	ss: 2 years before you filed for bankry as. Fill in the details for each gift or contributions to charities that than \$600 y's Name ss (Number, Street, City, State and ZIP Code ist Certain Losses 1 year before you filed for bankry bling? as. Fill in the details. be the property you lost and he loss occurred ist Certain Payments or Transfers 1 year before you filed for bankry he dabout seeking bankryptcy or pany attorneys, bankryptcy petition pany as. Fill in the details. h Who Was Paid ss or website address h Who Made the Payment, if Not Yaman Law Firm, P.A. Rivers Ave eston, SC 29406 ySharp Credit Counseling, Inc. N. Fairfield Ave Suite 200	2 years before you filed for bankruptcy, did you give any gifts or contributions with a to a. S. Fill in the details for each gift or contribution. Describe what you contributed Not you lost and you lost and you lost and you lose any lost and you lost and yo	2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than so. 5. Fill in the details for each gift or contribution. 6. Fill in the details for each gift or contribution. 7. Contributions to charities that total han \$600 7. Name 8. Sk (Number, Street, City, State and ZIP Code) 8. Sk (Number, Street, City, State and ZIP Code) 8. Fill in the details. 8. Fill in the details. 8. Be the property you lost and le loss occurred 8. Describe any insurance coverage for the loss include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. 8. St Certain Payments or Transfers 9. A year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any propertied about seeking bankruptcy or preparing a bankruptcy petition? 9. Any any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. 9. S. Fill in the details. 10. Who Was Paid sor website address with Made the Payment, if Not You man Law Firm, P.A. 8. Filling fee \$338, Credit report \$35, Attorney fees \$1,627 8. Filling fee \$338, Credit report \$35, Attorney fees \$1,627 8. Kivers Ave Subject Counseling, Inc. 8. Credit Counseling Course 9. G/29/2021

No

☐ Yes. Fill in the details.

Person Who Was Paid Description and value of any property Amount of Date payment transferred or transfer was Address payment made

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property

Case 21-01750-dd Doc 1 Filed 07/01/21 Entered 07/01/21 13:12:53 Desc Main Document Page 42 of 59

Debtor 1 Celeste Danielle Yelvington

Case number (if known)

	Include both outright transfers and transfers m include gifts and transfers that you have alread No Yes. Fill in the details.	ade as security (such as t	the granting of a se	ecurity interest or mortgage on you	r property). Do not
	Person Who Received Transfer Address Person's relationship to you	Description and v		Describe any property or payments received or debts paid in exchange	Date transfer was made
19.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pr No Yes. Fill in the details.		ny property to a se	elf-settled trust or similar device	of which you are a
	Name of trust	Description and v	value of the prope	rty transferred	Date Transfer was made
	List of Certain Financial Accounts, In Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, asso No Yes. Fill in the details.	cy, were any financial ac	counts or instrun	nents held in your name, or for y	
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accountinstrument	t or Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 cash, or other valuables?	year before you filed for	r bankruptcy, any	safe deposit box or other depos	itory for securities,
	NoYes. Fill in the details.				
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		escribe the contents	Do you still have it?
22.	Have you stored property in a storage unit	or place other than your	r home within 1 ye	ear before you filed for bankrupt	cy?
	■ No □ Yes. Fill in the details.				
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or I to it? Address (Number, S State and ZIP Code)		escribe the contents	Do you still have it?
Par	19: Identify Property You Hold or Control	for Someone Else			
23.	Do you hold or control any property that so for someone.	meone else owns? Incl	ude any property	you borrowed from, are storing	for, or hold in trust
	☐ Yes. Fill in the details. Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S		escribe the property	Value
Par	t 10: Give Details About Environmental Inf	Code) ormation			

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Case 21-01750-dd Doc 1 Filed 07/01/21 Entered 07/01/21 13:12:53 Desc Main Document Page 43 of 59

Debtor 1 Celeste Danielle Yelvington

regulations controlling the cleanup of these substances, wastes, or material.

Case number (if known)

-	Site means any location, facility, or property to own, operate, or utilize it, including dispo- Hazardous material means anything an env hazardous material, pollutant, contaminant,	osal sites. ironmental law defines as a hazardous						
Rep	port all notices, releases, and proceedings the	at you know about, regardless of when	they occurred.					
24.	. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?							
	No Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
25.	_	any release of hazardous material?						
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
26.	Have you been a party in any judicial or adn No Yes. Fill in the details.	ninistrative proceeding under any envir	onmental law? Include settlements	and orders.				
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case				
Par	rt 11: Give Details About Your Business or	Connections to Any Business						
27.	Within 4 years before you filed for bankrupt	cy, did you own a business or have any	y of the following connections to an	y business?				
	☐ A sole proprietor or self-employed i	n a trade, profession, or other activity,	either full-time or part-time					
	☐ A member of a limited liability comp	any (LLC) or limited liability partnershi	p (LLP)					
	☐ A partner in a partnership							
	☐ An officer, director, or managing executive of a corporation							
	☐ An owner of at least 5% of the voting or equity securities of a corporation							
	No. None of the above applies. Go to Part 12.							
	☐ Yes. Check all that apply above and fill							
	Business Name	Describe the nature of the business	Employer Identification number					
	Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security Dates business existed	number or ITIN.				
28.	Within 2 years before you filed for bankrupt institutions, creditors, or other parties.	cy, did you give a financial statement to	o anyone about your business? Incl	ude all financial				
	■ No							
	☐ Yes. Fill in the details below.							
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued						

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy

Case 21-01750-dd Doc 1 Filed 07/01/21 Entered 07/01/21 13:12:53 Desc Main Document Page 44 of 59

with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.

18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Celeste Danielle Yelvington

Celeste Danielle Yelvington

Signature of Debtor 2

Signature of Debtor 1

Date July 1, 2021

Date

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

No

Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Case 21-01750-dd Doc 1 Filed 07/01/21 Entered 07/01/21 13:12:53 Desc Main Document Page 45 of 59

		Docume	ni Page 45 0i 5	9	
Fill in this infor	rmation to identify your	case:			
Debtor 1	Celeste Danielle				
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	DISTRICT OF SOUTH	CAROLINA		
Case number					
(if known)					☐ Check if this is an
					amended filing
Official Fo	orm 108				
Stateme	nt of Intentio	n for Individu	uals Filing Und	der Chapte	er 7
If you are an inc	dividual filing under cha	pter 7, you must fill out t	his form if:		
creditors have	ve claims secured by yo	ur property, or			
		and the lease has not exp			
	ever is earlier, unless th				et for the meeting of creditors, e creditors and lessors you list
	eople are filing togethe	r in a joint case, both are	equally responsible for s	upplying correct in	formation. Both debtors must

Part 1: List Your Creditors Who Have Secured Claims

write your name and case number (if known).

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages,

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule Ca
Creditor's Sentry Management	■ Surrender the property.	□ No
name:	Retain the property and redeem it.	
Description of property securing debt: 1530 Fort Johnson Road, Unit 2L Charleston, SC 29412 Charleston County TMS: 425-14-00-181	☐ Retain the property and enter into a Reaffirmation Agreement. ☐ Retain the property and [explain]:	■ Yes
Creditor's Specialized Loan Servicing LLC	■ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.☐ Retain the property and enter into a	■ Yes
Description of 1530 Fort Johnson Road, Unit	Reaffirmation Agreement.	
property securing debt: Charleston, SC 29412 Charleston County TMS: 425-14-00-181	☐ Retain the property and [explain]:	

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will the lease be assumed?

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

Case 21-01750-dd Doc 1 Filed 07/01/21 Entered 07/01/21 13:12:53 Desc Main Document Page 46 of 59

Debtor 1	Celeste Danielle Yelvington	Case number (if known)	
Lessor's			□ No
Property:	on of leased		☐ Yes
Lessor's i			□ No
Property:	on of leased		☐ Yes
Lessor's			□ No
Property:	on of leased		☐ Yes
Lessor's	name: on of leased		□ No
Property:			☐ Yes
Lessor's	name: on of leased		□ No
Property:			☐ Yes
Lessor's	name: on of leased		□ No
Property:			☐ Yes
Lessor's	name: on of leased		□ No
Property:			☐ Yes
Part 3:	Sign Below		
Under per	nalty of perjury, I declare that I have indicated my intentio that is subject to an unexpired lease.	on about any property of my estate that sec	cures a debt and any personal
	Celeste Danielle Yelvington	X	
Cel	este Danielle Yelvington lature of Debtor 1	Signature of Debtor 2	
Date	July 1, 2021	Date	

Case 21-01750-dd Doc 1 Filed 07/01/21 Entered 07/01/21 13:12:53 Desc Main Document Page 47 of 59

Fill in this int	formation to identify your case:		Chaol	ana hay anly an d	iraatad in this form on	d in Form
Debtor 1	Celeste Danielle Yelvington			1Supp:	irected in this form and	
Debtor 2	Celeste Damene Tervington					
(Spouse, if filing			- - '	1. There is no pres	umption of abuse	
United State	es Bankruptcy Court for the: District of South C	arolina			o determine if a presu	•
Casa numbe					nade under <i>Chapter 7</i> icial Form 122A-2).	Means Test
Case number			- 🗖 :		does not apply now by service but it could a	
				Check if this is a	n amended filing	
Official	Form 122A - 1					
Chapte	r 7 Statement of Your Cur	rent Month	nly Inco	me		04/20
attach a separ case number qualifying mil	te and accurate as possible. If two married people a rate sheet to this form. Include the line number to w (if known). If you believe that you are exempted fro itary service, complete and file Statement of Exemp Calculate Your Current Monthly Income	hich the additional in m a presumption of al	formation appl buse because	ies. On the top of ar	ny additional pages, wri narily consumer debts (te your name and or because of
1. What is	s your marital and filing status? Check one or	ıly.				
■ Not	married. Fill out Column A, lines 2-11.					
☐ Mar	ried and your spouse is filing with you. Fill ou	it both Columns A a	nd B, lines 2-1	1.		
☐ Mar	ried and your spouse is NOT filing with you.	You and your spou	ıse are:			
	iving in the same household and are not lega	Ily separated. Fill o	out both Colum	ns A and B, lines 2	2-11.	
F	iving separately or are legally separated. Fill penalty of perjury that you and your spouse are living apart for reasons that do not include evading	egally separated und	der nonbankru	ptcy law that applie	es or that you and you	
101(10A). I the 6 mont	average monthly income that you received from all For example, if you are filing on September 15, the 6-m hs, add the income for all 6 months and divide the total wn the same rental property, put the income from that p	onth period would be N by 6. Fill in the result.	March 1 through Do not include a	August 31. If the amount m	ount of your monthly incor ore than once. For examp	ne varied during ble, if both
				olumn A ebtor 1	Column B Debtor 2 or non-filing spouse	
	ross wages, salary, tips, bonuses, overtime, deductions).	and commissions	(before all \$	1,184.48	\$	
	ny and maintenance payments. Do not include n B is filled in.	payments from a sp	oouse if	0.00	\$	
of you from ar and roo	ounts from any source which are regularly pa or your dependents, including child support a unmarried partner, members of your household ommates. Include regular contributions from a sp . Do not include payments you listed on line 3.	Include regular con , your dependents,	tributions parents,	0.00	\$	
	come from operating a business, profession,		_			
		Debtor 1	1			
	receipts (before all deductions)	\$ <u>0.00</u> -\$ <u>0.00</u>				
	ry and necessary operating expenses	0.00	py here -> \$	0.00	\$	
	onthly income from a business, profession, or far come from rental and other real property	n \$	py nere -> ψ	0.00	Ψ	
6. Net inc	ome nominental and other real property	Debtor '	1			
Gross i	receipts (before all deductions)	\$ 0.00				
	ry and necessary operating expenses	-\$ 0.00				
	onthly income from rental or other real property	\$ 0.00 Co	py here -> \$	0.00	\$	
7. Interes	st, dividends, and royalties	_	\$	0.00	\$	

Official Form 122A-1

Case 21-01750-dd Doc 1 Filed 07/01/21 Entered 07/01/21 13:12:53 Desc Main Document Page 48 of 59

Celeste Danielle Yelvington Debtor 1 Case number (if known) Column A Column B Debtor 2 or Debtor 1 non-filing spouse 8. Unemployment compensation 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For your spouse \$ 9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled 0.00 if retired under any provision of title 10 other than chapter 61 of that title. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments made under the Federal law relating to the national emergency declared by the President under the National Emergencies Act (50 U.S.C. 1601 et seq.) with respect to the coronavirus disease 2019 (COVID-19); payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below... 0.00 0.00 Total amounts from separate pages, if any. \$ 0.00 11. Calculate your total current monthly income. Add lines 2 through 10 for 1.184.48 1,184.48 each column. Then add the total for Column A to the total for Column B. Total current monthly Part 2: **Determine Whether the Means Test Applies to You** 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11 Copy line 11 here=> 1,184.48 Multiply by 12 (the number of months in a year) **x** 12 14,213.76 12b. The result is your annual income for this part of the form 12h 13. Calculate the median family income that applies to you. Follow these steps: SC Fill in the state in which you live. Fill in the number of people in your household. Fill in the median family income for your state and size of household. 49,999.00 13 To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare? Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Go to Part 3. Do NOT fill out or file Official Form 122A-2. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. 14b. Go to Part 3 and fill out Form 122A-2. Part 3: By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. X /s/ Celeste Danielle Yelvington **Celeste Danielle Yelvington**

Debtor 1	Celeste Danielle Yelvington	Case number (if known)	
	Signature of Debtor 1		
Da	Ate July 1, 2021 MM / DD / YYYY		
	If you checked line 14a, do NOT fill out or file Form 122A-2.		
	If you checked line 14b, fill out Form 122A-2 and file it with this form.		

Case 21-01750-dd Doc 1 Filed 07/01/21 Entered 07/01/21 13:12:53 Desc Main Document Page 50 of 59

Debtor 1 Celeste Danielle Yelvington Case number (if known)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 01/01/2021 to 06/30/2021.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Employer: Lowe's Home Centers, LLC

Constant income of \$1,184.48 per month.*

Case 21-01750-dd Doc 1 Filed 07/01/21 Entered 07/01/21 13:12:53 Desc Main Document Page 51 of 59

Debtor 1 Celeste Danielle Yelvington Case number (if known)

*Paycheck Details:

Lowe's Home Centers, LLC

Date	Earnings	Overtime	Taxes	Other	Net Check
2021-03-12	121.Ĭ1	0.00	10.21	0.00	110.90
2021-03-26	363.78	0.00	37.92	0.00	325.86
2021-04-09	829.12	0.00	138.31	0.00	690.81
2021-04-23	1,050.38	230.16	257.89	0.00	1,022.65
2021-05-07	931.90	0.00	164.98	0.00	766.92
2021-05-21	1,092.01	197.60	244.10	0.00	1,045.51
2021-05-28	219.35	0.00	64.92	0.00	154.43
2021-06-04	1,031.00	25.19	183.53	0.00	872.66
2021-06-18	1,015.29	0.00	172.91	0.00	842.38
Totals:	6,653.94	452.95	1,274.77	0.00	5,832.12

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$78	administrative fee
<u>+</u> \$15	trustee surcharge
\$338	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 21-01750-dd Doc 1 Filed 07/01/21 Entered 07/01/21 13:12:53 Desc Main Document Page 56 of 59

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtDistrict of South Carolina

In re	Celeste Danielle Yelvington		Case No		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPENSA	ATION OF ATTO	RNEY FOR D	EBTOR(S)	
(Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I compensation paid to me within one year before the filing of be rendered on behalf of the debtor(s) in contemplation of or	the petition in bankruptcy	, or agreed to be pa	d to me, for services rea	ndered or to
	For legal services, I have agreed to accept		\$	1,627.00	
	Prior to the filing of this statement I have received		\$	1,627.00	
	Balance Due		\$	0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed compensa	tion with any other person	unless they are me	mbers and associates of	my law firm.
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names of	with a person or persons won the people sharing in the	who are not membe e compensation is a	rs or associates of my la tached.	w firm. A
5.	In return for the above-disclosed fee, I have agreed to render	legal service for all aspect	ts of the bankruptcy	case, including:	
ŀ	a. Analysis of the debtor's financial situation, and renderingb. Representation of the debtor at the meeting of creditors atc. [Other provisions as needed]				ruptcy;
6. l	By agreement with the debtor(s), the above-disclosed fee doe Representation of the debtors in any appeal heavily contested and unusual contested m actions or any other advesary proceedings.	ls, post confirmation matters, dischargability	notions, modifica		
	C	ERTIFICATION			
	I certify that the foregoing is a complete statement of any agreenkruptcy proceeding.	reement or arrangement for	payment to me for	representation of the de	ebtor(s) in
Jı	luly 1, 2021	/s/ Richard A Ste	adman, Jr.		
	Date	Richard A Stead	man, Jr. 4284		
		Signature of Attorne Steadman Law F			
		6296 Rivers Aver			
		Suite 102			
		Charleston, SC 2			
		843-529-1100 Fa		m	
		rsteadman@stea Name of law firm	umamawiirm.co	111	
		Trance of taw fills			

LOCAL OFFICIAL FORM 1007-1(b) TO SC LBR 1007-1

United States Bankruptcy Court District of South Carolina

		District of South Curonna		
In re	Celeste Danielle Yelvington		Case No.	
		Debtor(s)	Chapter	7
	CERTIFI	ICATION VERIFYING CREDI	TOR MATRIX	(
CM/E	uptcy Rule 1007-1 that the master CF, or conventionally filed in a ty	torney for the debtor if applicable, her mailing list of creditors submitted eith yped hard copy scannable format which ements and lists which are being filed at the	er on computer d h has been compa	iskette, electronically filed via ared to, and contains identical
	Master mailing list of creditors sul	bmitted via:		
	(a) computer of	diskette		
	(b) scannable (number of sheets submit			
	(c) X electronic ve	ersion filed via CM/ECF		
Date:	July 1, 2021	/s/ Celeste Danielle Yelvingt	on	
		Celeste Danielle Yelvington		
		Signature of Debtor		
Date:	July 1, 2021	/s/ Richard A Steadman, Jr.		
		Signature of Attorney		
		Richard A Steadman, Jr. 428	34	
		Steadman Law Firm, P.A. 6296 Rivers Avenue		
		Suite 102		
		Charleston, SC 29406		
		843-529-1100 Fax: 843-529-	-0027	
		Typed/Printed Name/Address	/Telephone	

4284 SC

District Court I.D. Number

1ST FRANKLIN FINANCIAL PO BOX 31231 CHARLESTON SC 29417-1231

AMEX
PO BOX 297871
FORT LAUDERDALE FL 33329

CHARLESTON WATER SYSTEM 103 ST. PHILLIP ST CHARLESTON SC 29403

CHASE PO BOX 15369 WILMINGTON DE 19850

ENTERPRISE RENT-A-CAR 600 CORPORATE PARK DRIVE ST SAINT LOUIS MO 63105

HONDA FINANCIAL SERVICES 20800 MADRONA AVENUE TORRANCE CA 90503

IRS*
CENTRALIZED INSOLVENCY OPERATIONS
PO BOX 7346
PHILADELPHIA PA 19101-7346

JAMES ISLAND PSD PO BOX 13569 CHARLESTON SC 29422

MEDICREDIT INC. P.O. BOX 1629 MARYLAND HEIGHTS MO 63043-0629

MIDLAND CREDIT MANAGEMENT 320 E BIG BEAVER RD STE 300 TROY MI 48083

PORTFOLIO RECOVERY ASSOCIATES LLC 120 CORPORATE BLVD NORFOLK VA 23502

SC DEPARTMENT OF REVENUE P. O. BOX 12265 COLUMBIA SC 29211-2265

SENTRY MANAGEMENT
BRIGADIER CONDOMINIUMS
4925 LACROSS RD INIT 112
CHARLESTON SC 29406

SPECIALIZED LOAN SERVICING LLC 8742 LUCENT BLVD SUITE 300 HIGHLANDS RANCH CO 80129

THE BUREAUS INC 650 DUNDEE RD STE 370 NORTHBROOK IL 60062

WF/PREFERR
PO BOX 14517
DES MOINES IA 50306